PART B - FEE(S) TRANSMITTAL

PART B - FEE(S) TR

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MCHALE & SLA 2855 PGA BLVD				•	ertificate of Mailing or Tran this Fee(s) Transmittal is beir with sufficient postage for fi til Stop ISSUE FEE address PTO (703) 746-4000, on the	emission		
05/06/2005 WARDEL	R3 00000141 10782721			Debra, N	Gerstemeier	(Depositor's name)		
		ΛΛ ΛΩ		910) (Signature)		
01 FC:2501 700.00 OP 02 FC:1504 300.00 OP					5-3-205	(Date)		
03 FC:8001 APPLICATION NO.	FILING DATE	30 DP	FIRST NAMED INV	ENTOR	NTOR ATTORNEY DOCKET NO.			
10/782,721				elcer 2166.009 3418				
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APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE		06/16/2005		
nonprovisional	YES	\$700		\$300	\$300 \$1000			
EXAM	INER	ART UN	IT	CLASS-SUBCLASS				
MARCELO, EMMAI	NUEL MONSAYAC	3654		254-275000				
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, al (2) the name of registered attorn 2 registered pate	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNED Dynacon,	EE	ow, no assignee f this form is NOT (B	data will appear of a substitute for fil) RESIDENCE: (C Bryan,	n the patent. If an assig ling an assignment. CITY and STATE OR CO	OUNTRY) Corporation or other private gr			
a. The following fee(s) are			. Payment of Fee(s		corporation of other private gr	toup chary — covernmen		
Issue Fee		•		amount of the fee(s) is e	nclosed.			
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Advance Order - # of	Copies 10		The Director in Deposit Account it	s hereby authorized by Number	charge the required fee(s), or (enclose an extra	r credit any overpayment, to copy of this form).		
a. Applicant claims St	(from status indicated above) MALL ENTITY status. See 3 is requested to apply he issue ablication Fee (if required) w	7 CFR 1.27.	☐ b. Applicant is	no longer claiming SMA	ALL ENTITY status. See 37 C sly paid issue fee to the applic gistered attorney or agent; or			
iterest as shown by the reco	ords of the United Spates Page	nt and Trademark	Office.		Mr 3, 05			
Authorized Signature		<i>/</i>		Date	119 3, 03			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/21 (09-04)

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are required to respond to a co Application Number ection of information unless it displays a valid OMB control number. Inder the Paperwork F 10/782,721 **TRANSMITTAL** Filing Date 02/18/2004 First Named Inventor FORM **Toby Selcer** Art Unit 3654 **Examiner Name Emmanuel Monsayac Marcelo** (to be used for all correspondence after initial filing) Attorney Docket Number 2166 009

Tota	i Number of	Pages in	This Submission	<u> </u>		2100.0	503		
ENCLOSURES (Check all that apply)									
✓	Fee Trans	smittal Fo	orm		Drawing(s)				Allowance Communication to TC
	✓ Fe	e Attach	ed		Licensing-related Paper	s			al Communication to Board seals and Interferences
	Extension Express A Informatio Certified C Document Reply to M Incomplet	fidavits/d of Time Abandonr on Disclos Copy of F t(s) Missing P e Applica epply to Mi	leclaration(s) Request ment Request sure Statement Priority	Rem	Petition Petition to Convert to a Provisional Application Power of Attorney, Revo Change of Corresponde Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table of arks	nce Address		(Appea Propri Status	al Communication to TC al Notice, Brief, Reply Brief) etary Information s Letter Enclosure(s) (please Identify):
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Printed name Michael A. Slavin									
Date			My 3, 2	7,00 S		Reg. No.	34,0	16	
CERTIFICATE OF TRANSMISSION/MAILING									
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature									
			4	J.					
Typed	or printed n	name	Debra N. G	erste	meier			Date	5.3.2075

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PTO/SB/17 (10-04v2)

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FEE TRANSMITTAL for FY 2005 Effective 10/01/2004. Patent fees are subject to annual revision.

✓ Applicant claims small entity status. See 37 CFR 1.27

(\$) 1030.00 TOTAL AMOUNT OF PAYMENT

Complete if Known				
Application Number	10/782,721			
Filing Date	02/18/2004			
First Named Inventor	Toby Selcer			
Examiner Name	Emmanuel Monsayac Marcelo			
Art Unit	3654			
Attorney Docket No.	2166.009			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
l D Order D D	Large Entity Small Entity					
Deposit Account:	Fee Fee Code (\$)	Fee Fee Fee Description Fee Paid				
Account Number	1051 130	2051 65 Surcharge - late filing fee or oath				
Deposit Account	1052 50	2052 25 Surcharge - late provisional filing fee or cover sheet				
Name	1053 130	1053 130 Non-English specification				
The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments	1812 2,520	1812 2,520 For filing a request for ex parte reexamination				
Charge any additional fee(s) or any underpayment of fee(s)	1804 920	1804 920* Requesting publication of SIR prior to Examiner action				
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805 1,840	1805 1,840* Requesting publication of SIR after Examiner action				
FEE CALCULATION	1251 110	2251 55 Extension for reply within first month				
1. BASIC FILING FEE	1252 430	2252 215 Extension for reply within second month				
Large Entity Small Entity	1253 980	2253 490 Extension for reply within third month				
Fee Fee Fee Fee Description Fee Paid	1254 1,530	2254 765 Extension for reply within fourth month				
Code (\$) Code (\$) 1001 790 2001 395 Utility filing fee	1255 2,080	2255 1,040 Extension for reply within fifth month				
1002 350 2002 175 Design filling fee	1401 340	2401 170 Notice of Appeal				
1003 550 2003 275 Plant filing fee	1402 340	2402 170 Filing a brief in support of an appeal				
1004 790 2004 395 Reissue filing fee	1403 300	2403 150 Request for oral hearing				
1005 160 2005 80 Provisional filing fee	1451 1,510	1451 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$)	1452 110	2452 55 Petition to revive - unavoidable				
	1453 1,370	2453 685 Petition to revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,370	2501 685 Utility issue fee (or reissue) 1000.00				
Extra Claims below Fee Paid	1502 490	2502 245 Design issue fee				
Total Claims20** = X =	1503 660	2503 330 Plant issue fee				
Claims X X X X X X X X X X X X X X X X X X X	1460 130	1460 130 Petitions to the Commissioner				
	1807 50	1807 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806 180	1806 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$)	8021 40	8021 40 Recording each patent assignment per property (times number of properties)				
1202 18 2202 9 Claims in excess of 20 1201 88 2201 44 Independent claims in excess of 3	1809 790	2809 395 Filing a submission after final rejection (37 CFR 1.129(a))				
1203 300 2203 150 Multiple dependent claim, if not paid	1810 790	2810 395 For each additional invention to be				
1204 88 2204 44 ** Reissue independent claims	1801 790	examined (37 CFR 1.129(b)) 2801 395 Request for Continued Examination (RCE)				
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1801 790	2801 395 Request for Continued Examination (RCE) 1802 900 Request for expedited examination				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1002 300	of a design application				
SUBTOTAL (2) (\$)	Other fee (s	ecify) Advance Order-(10) copies of patent 30.00				
**or number previously paid, if greater; For Reissues, see above	*Reduced by	Basic Filing Fee Paid SUBTOTAL (3) (\$) 1030.00				
SUBMITTED BY		(Complete (if applicable))				
Name (Print/Type) Michael A. Slayin///	Registra	tion No. 34,016 Telephone (561) 625-6575				

Signature WARMING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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